				_
Please type a plus sign ((+)	inside this box	\rightarrow	1+1

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Nu	mber	67,010-056 / H2629-SS	
		First Named Invento	or	Dean	
		COMPL	COMPLETE IF KNOWN		
		Application Number		Herewith	
Declaration Submitted OR With Initial Filing Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date	Here	with		
	Group Art Unit				
	(37 ČFR 1.16 (e))	Examiner Name			
(;)	PATENT (37 Declaration Submitted with Initial	DESI PATENT API (37 CFR Declaration Submitted OR with Initial	DESIGN PATENT APPLICATION (37 CFR 1.63) Declaration Submitted With Initial Filing Filing OR OR OR OR OR Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))	CLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) Declaration Submitted With Initial Filing (surcharge (37 CFR 1.16 (e)) First Named Inventor COMPL Application Number Filing Date Group Art Unit Fxaminer Name	DESIGN PATENT APPLICATION (37 CFR 1.63) Declaration Submitted With Initial Filing First Named Inventor COMPLETE II Application Number Filing Date Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) Fixaminer Name

As a be	As a below named inventor, I hereby declare that:						
My resi	dence, mailing address, a	nd citizenship are as sta	ited below next to my n	ame.			
I believ	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
Low F	Low Flow Phase Separator with Intermittent Pumping						
45		(7	Title of the Invention)				
_ '	ecification of which						
(attached hereto DR as filed on (MM/DD/YYYY)		as United	States Application	Number or PCT International		
	ation Number		amended on (MM/DD/Y	YYY) [(if applicable).		
l hereb amend	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior	Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
				0000			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
	Application Number(s)	Filing Dat	e (MM/DD/YYYY)	numbers supplem	al provisional application are listed on a ental priority data sheet 02B attached hereto.		

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box

+

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

i Direct all correspondence to: TV i	Customer Nur or Bar Code L	111/	26096		OR	Correspondence address below	
John M. Siragusa Name							
Address 400 W. Maple Road							
Suite 350							
Birmingham City	·····			State	Michigan	ZIP 48009	
United States Country		Telephon	(248) le	988-83	360	(248) 988-8363 Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INV	ENTOR:			A petiti	on has been fil	led for this unsigned inventor	
Given Name W. Clark (first and middle [if any])		·		Family N	Name Dean	<i></i>	
Inventor's W. Clark Dean Date Jan. 13'04							
Residence: City Simsbury,			State CT		US Country	US eitizenship	
Mailing Address 48 Northgate							
Mailing Address	-						
City Simsbury	State CT			ZIP 06	Country US		
NAME OF SECOND INVENTOR	:			A petiti	on has been fil	led for this unsigned inventor	
Given Name (first and middle [if any])				•	Family Name or Surname		
Inventor's Signature						Date	
Residence: City		- I	State		Country	Citizenship	
Mailing Address							
Mailing Address							
City	State			ZIP		Country	
Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

PTO/SB/02C (3-97)

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)

			
Name	Registration Number	Name	Registration Number
Name Theodore W. Olds John E. Carlson David J. Gaskey Kerrie A. Laba William S. Gottschalk David L. Wisz Karin H. Butchko John M. Siragusa Anthony P. Cho Anna M. Shih	Registration Number 33,080 37,794 37,139 42,777 44,130 46,350 45,864 46,174 47,209 36,372	Name George J. Romanik Gregory R. Stephenson Stephen G. Mican	Registration Number 34,711 44,356 31,983

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

